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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	550299.00070
	First Named Inventor	Michael H. Ostrowski
	COMPLETE IF KNOWN	
	Application Number	10/720,718
	Filing Date	November 24, 2003
	Art Unit	3751
Examiner Name		

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HIGH FLOW RATE WATER SUPPLY ASSEMBLY

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 11-24-2003 as United States Application Number or PCT International

Application Number 10/720,718 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

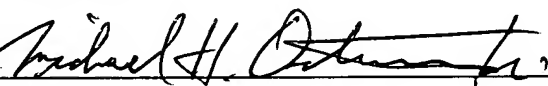
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number 26710 OR <input type="checkbox"/> Correspondence address below			
Name Carl R. Schwartz, Esq.			
Address c/o Quarles & Brady, LLP			
Address 411 East Wisconsin Avenue			
City Milwaukee		State Wisconsin	ZIP 53202
Country U.S.A.	Telephone 414-277-5715		Fax 414-271-3552
<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Michael H. (first and middle [if any])		Family Name Ostrowski or Surname	
Inventor's Signature 		Date April 16, 2004	
Residence: City Lake Forest	State IL	Country US	Citizenship US
Mailing Address 499 South Ridge Road			
Mailing Address			
City Lake Forest	State IL	ZIP 60045	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Jeffrey L. (first and middle [if any])		Family Name Mueller or Surname	
Inventor's Signature		Date	
Residence: City Plymouth	State WI	Country US	Citizenship US
Mailing Address W6679 Red Fox Run			
Mailing Address			
City Plymouth	State WI	ZIP 53073	Country US
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James R.		Lewis	
Inventor's Signature		Date	
Residence: City Kohler	State WI	Country US	Citizenship US
Mailing Address 226 Forest Road			
Mailing Address			
City Kohler	State WI	ZIP 53044	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Stanley P.		Kaymen	
Inventor's Signature		Date	
Residence: City Sheboygan	State WI	Country US	Citizenship US
Mailing Address 315 Bell Avenue			
Mailing Address			
City Sheboygan	State WI	ZIP 53083	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
John H.		Schott	
Inventor's Signature		Date	
Residence: City Sheboygan	State WI	Country US	Citizenship US
Mailing Address 4225 South 15th Street			
Mailing Address			
City Sheboygan	State WI	ZIP 53081	Country US

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Attorney Docket Number 550299.00070

First Named Inventor Michael H. Ostrowski

COMPLETE IF KNOWN

Application Number 10/720,718

Filing Date November 24, 2003

Art Unit 3751

Examiner Name

I hereby declare that:

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number **26710** OR ☐ Correspondence address below

Name **Carl R. Schwartz, Esq.**

Address **c/o Quarles & Brady, LLP**

Address **411 East Wisconsin Avenue**

City **Milwaukee**

State **Wisconsin**

ZIP **53202**

Country **U.S.A.**

Telephone **414-277-5715**

Fax **414-271-3552**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name **Michael H.**
(first and middle (if any))

Family Name **Ostrowski**
or Surname

Inventor's
Signature

Date

Residence: City **Lake Forest**

State **IL**

Country **US**

Citizenship **US**

Mailing Address **499 South Ridge Road**

Mailing Address

City **Lake Forest**

State **IL**

ZIP **60045**

Country **US**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name **Jeffrey L.**
(first and middle (if any))

Family Name **Mueller**
or Surname

Inventor's
Signature

Date

Residence: City **Plymouth**

State **WI**

Country **US**

Citizenship **US**

Mailing Address **W6679 Red Fox Run**

Mailing Address

City **Plymouth**

State **WI**

ZIP **53073**

Country **US**

☒ Additional Inventors are being named on the **1** supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

[Page 2 of 3]

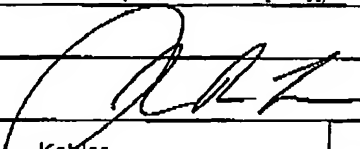
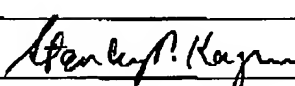
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James R.		Lewis	
Inventor's Signature 		Date <u>4/21/04</u>	
Residence: City <u>Kohler</u>	State <u>WI</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>226 Forest Road</u>			
Mailing Address			
City <u>Kohler</u>	State <u>WI</u>	ZIP <u>53044</u>	Country <u>US</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Stanley P.		Kaymen	
Inventor's Signature 		Date <u>4-22-04</u>	
Residence: City <u>Sheboygan</u>	State <u>WI</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>315 Bell Avenue</u>			
Mailing Address			
City <u>Sheboygan</u>	State <u>WI</u>	ZIP <u>53083</u>	Country <u>US</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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John H.		Schott	
Inventor's Signature		Date	
Residence: City <u>Sheboygan</u>	State <u>WI</u>	Country <u>US</u>	Citizenship <u>US</u>
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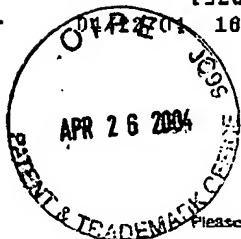
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John H.		Schott	
Inventor's Signature <i>John H. Schott</i>		Date 4/23/04	
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